

**Sec. 19a-36-A1. Definitions**

As used in Sections 19a-36-A1 to 19a-36-A46 of the Regulations of Connecticut State Agencies:

(1) “Authorized agent” means an individual designated by a local director of health to act for him or her in the performance of any of his or her duties.

(2) “Carrier” means an infected person or animal who, without any apparent symptoms of communicable disease, harbors a specific infectious agent and may serve as a source of infection for humans. The state of harboring a specific infectious agent may occur in an individual with an infection that is inapparent throughout its course (asymptomatic carrier), or in an individual during the incubation period, convalescence, and post-convalescence of a clinically recognizable disease (incubatory carrier and convalescent carrier). The carrier state may be of short duration (transient carrier) or long duration (chronic carrier).

(3) “Case” means a person or animal who exhibits evidence of disease.

(4) “Cleaning” means the process of removal of organic matter conducive to growth or maintenance of infectivity of infectious agents by scrubbing and washing as with hot water and soap.

(5) “Commissioner” means the state commissioner of health services.

(6) “Communicable disease” means a disease or condition, the infectious agent of which may pass or be carried directly or indirectly, from the body of one person or animal to the body of another person or animal.

(7) “Communicable period” means any time period during which a specific infectious agent may be transferred directly or indirectly from an infected person or animal to another human or animal.

(8) “Contact” means a person or animal known to have had association with an infected person or animal in such a manner as to have been exposed to a particular communicable disease.

(9) “Contamination” means the presence of undesirable substance or material which may contain an infectious agent on external body surfaces (e.g., skin), articles of apparel, inanimate surfaces or in food or beverages.

(10) “Cultures” mean growths of an infectious agent propagated on selected living or artificial media.

(11) “Date of onset” means the day, month and year on which the case or suspected case experienced the first sign or symptoms of the disease.

(12) “Department” means the Connecticut Department of Health Services.

(13) “Disinfection” means a directly applied chemical or physical process by which the disease producing powers of infectious agents are destroyed. (1) “Concurrent disinfection” means the immediate disinfection and disposal of body discharges, and the immediate disinfection or destruction of all infected or presumably infected materials. (2) “Terminal disinfection” means the process of rendering the personal clothing and immediate physical environment of a patient free from the probability of conveying an infectious agent to others after removal of the patient or at a time when the patient is no longer a source of infection.

(14) “Epidemic” means the occurrence of cases of illness clearly in excess of normal expectancy over a specific time period in a community, geographic region, building or institution. The number of cases indicating an epidemic may vary according to the causative

agent, size and type of population exposed, previous experience with the disease, and time and place of occurrence. An outbreak of disease is an epidemic.

(15) “Epidemiologic investigation” means an inquiry into the incidence, distribution and source of disease to determine its cause, means of prevention, and efficacy of control measures.

(16) “Foodborne outbreaks” means illness in two or more individuals acquired through the ingestion of common-source food or water contaminated with chemicals, infectious agents or their toxic products. Foodborne outbreaks include, but are not limited to, illness due to heavy metal intoxications, staphylococcal food poisoning, botulism, salmonellosis, shigellosis, *Clostridium perfringens* intoxication and hepatitis A.

(17) “Foodhandler” means a person who prepares, processes, or otherwise handles food or beverages for people other than members of his or her immediate household.

(18) “Health care facility” means any hospital, long term care facility, home health care agency, clinic or other institution licensed under Chapter 368v of the Connecticut General Statutes and also facilities operated and maintained by any state agency for the care or treatment of mentally ill persons or persons with mental retardation or substance abuse problems.

(19) “Health care provider” means a person who has direct or supervisory responsibility for the delivery of health care or medical services. This shall include but not be limited to: licensed physicians, nurse practitioners, physician assistants, nurses, dentists, medical examiners, and administrators, superintendents and managers of health care facilities.

(20) “Incubation period” means the time interval between exposure to a disease organism and the appearance of the first symptoms of the resulting disease.

(21) “Infection” means the entry and multiplication of an infectious agent in the body of a person or animal with or without clinical symptoms.

(22) “Infectious agent” means a microorganism capable of producing infection with or without disease.

(23) “Isolation” means the use of special precautions during the period of communicability to prevent transmission of an infectious agent. Such special precautions may include: physical separation of infected persons or animals from others, or precautions such as blood precautions that do not necessarily result in physical separation of individuals.

(24) “Laboratory” means any facility licensed, or approved by the department in accordance with section 19a-30 of the Connecticut General Statutes.

(25) “Local director of health” means and includes the city, town, borough or district director of health and any person legally authorized to act for the local director of health.

(26) “Medical information” means the recorded health information on an individual who has a reportable disease or who has symptoms of illness in the setting of an outbreak. This information includes details of a medical history, physical examination, any laboratory test, diagnosis, treatment, outcome and the description and sources of suspected causative agents for such disease or illness.

(27) “Nosocomial infection” means infections that develop within a hospital or other health care facility or are produced by microorganisms acquired while in a hospital or health care facility.

(28) “Outbreak.” See “epidemic.”

*Regulations of Connecticut State Agencies*

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(29) “Quarantine” means the formal limitation of freedom of movement of persons or animals exposed to, or suffering from a reportable disease for a period of time not longer than either the longest incubation period or the longest communicable period of the disease, in order to prevent spread of the infectious agent of that disease.

(30) “Reportable disease” means a communicable disease, disease outbreak, or other condition of public health significance required to be reported to the department and local health directors.

(31) “Reportable laboratory finding” means a laboratory result suggesting the presence of a communicable disease or other condition of public health significance required to be reported to the department and local health directors.

(32) “State epidemiologist” means the person designated by the Commissioner as the person in charge of communicable disease control for the state.

(33) “Surveillance” means the continuing scrutiny of all aspects of occurrence and spread of a disease relating to effective control of that disease, which may include but not be limited to the collection and evaluation of: morbidity and mortality reports; laboratory reports of significant findings; special reports of field investigations of epidemics and individual cases; data concerning the availability, use, and untoward side effects of the substances used in disease control, such as rabies vaccine; and information regarding immunity levels in segments of the population.

(34) “Suspected case” means a person or animal suspected of having a particular disease in the temporary or permanent absence of definitive clinical or laboratory evidence.

(35) “Other condition of public health significance” means a non-communicable disease caused by a common source or prevalent exposure such as pesticide poisoning, silicosis or lead poisoning.

(Effective October 25, 1989; Amended October 10, 2008; Amended March 19, 2025)

**Sec. 19a-36-A57. Definitions**

As used in sections 19a-36-A57 through 19a-36-A63:

(1) “Advisory committee” means a group of consultants, appointed by the commissioner and serving in a voluntary capacity, to advise the commissioner on matters relating to the regulation of environmental laboratories.

(2) “Commissioner” means the Commissioner of Public Health.

(3) “Department” means the Connecticut Department of Public Health.

(4) “Environmental laboratory” means any facility or other area defined in subsection (a) of Section 19a-29a of the Connecticut General Statutes.

(Adopted effective November 29, 1995)

**Sec. 19a-36-A58. Identification and tracking of samples**

Every sample received in an environmental laboratory for testing shall be numbered or otherwise marked so that it may be identified and related to the source from which it was derived. A dated record of its receipt, disposition and examination and of the findings obtained shall be made and kept on file for a minimum of two (2) years after receipt.

(Adopted effective November 29, 1995)

**Sec. 19a-36-A59. Examination of samples**

An environmental laboratory shall have available at all times in the immediate bench area of personnel engaged in examining samples and performing related procedures within a speciality (e.g., minerals, nutrients, volatile organics, trace metals) current laboratory manuals or other complete written descriptions and instructions related to the analytical methods used by those personnel, designated and dated to reflect the most recent supervisory review. Such manuals shall also contain information concerning preparation and storage of reagents, standards and calibration procedures, and pertinent literature references.

(Adopted effective November 29, 1995)

**Sec. 19a-36-A60. Referral of samples**

(a) An environmental laboratory shall refer samples for testing only to an environmental laboratory that is registered or approved by the department.

(b) An environmental laboratory shall perform at least seventy (70) percent of those tests for which it has approval and refer out those tests for which approval has not been granted.

(c) When samples have been referred, reports shall be done by one of the following:

(1) The testing environmental laboratory, with permission from the referring environmental laboratory, may send test results directly to the person who ordered the tests.

(2) The referring environmental laboratory shall indicate on the report to the person who ordered the test the name and address of each environmental laboratory at which a test was performed.

(Adopted effective November 29, 1995)

**Sec. 19a-36-A61. Proficiency testing**

(a) An environmental laboratory shall enroll in a proficiency testing program approved by the department.

(b) An environmental laboratory shall successfully participate in an approved program for each analyte or test for which it has approval.

(c) The proficiency testing samples shall be examined or tested with the environmental laboratory's regular workload by personnel who routinely perform the testing in the environmental laboratory, using methods approved by the department.

(Adopted effective November 29, 1995)

**Sec. 19a-36-A62. Qualifications of director**

No person shall be a director of an environmental laboratory unless one (1) of the following qualifications are met.

(a) When microbiology is performed, the director shall have at least:

(1) a baccalaureate degree from an accredited institution including a minimum of eight (8) semester hours of microbiology; and

(2) a minimum of one (1) year of pertinent experience in environmental microbiology.

(b) When chemical analyses are performed, the director shall have at least:

(1) a baccalaureate degree from an accredited institution including a minimum of eight (8) semester hours of inorganic and/or organic chemistry; and

(2) a minimum of one (1) year of pertinent experience in environmental chemistry.

(Adopted effective November 29, 1995)

**Sec. 19a-36-A63. Advisory committee**

The advisory committee shall consist of:

- (a) two (2) private environmental laboratory directors;
- (b) two (2) public environment laboratory directors;
- (c) two (2) members from public water utilities;
- (d) one (1) specialist in microbiology from a registered or approved environmental laboratory;
- (e) one (1) specialist in inorganic chemistry from a registered or approved environmental laboratory;
- (f) one (1) specialist in organic chemistry from a registered or approved environmental laboratory;
- (g) one (1) person who is not a laboratory director and has no financial interest in any laboratory registered with the department; and
- (h) one (1) person who is the owner of an environmental laboratory.

(Adopted effective November 29, 1995)